ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	٠,٠٤		10/01/01
FEE DETERMINATION		1	
O.I.P.E. CLASSIFIER	WHY		(0-14-0)
FORMALITY REVIEW	TD	JC1175	10/29/01
RESPONSE FORMALITY REVIEW	2/5/	1091	3/19962

INDEX OF CLAIMS

	Rejected		Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled		Appeal
			Objected
-	Restricted	U	Objected

Claim Date			Date	Original Driginal	Date	9
Per Per		51		Final		1
11		51		Sinal		
11 / / / 2 3 3 4 5 6 7 7 8 9 10 11 12 V / / / / / / / / / / / / / / / / /		51		: : ішіоі	1	
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9 10 11 1 1		57		108		
10 11 12		58				
10 11 12 13 0 14 0 0 15 0 0 16 0 0 18 1 19 22 23 23 (24) 22 23 (24) 25 26 27 7 1 28 29 30		59		1109		\vdash
12		60		111		
13 0		61		112		
14 (U 0 1 15 U 0 1		62		113		
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10 / / / 18 19 19 19 19 19 19 19		65		116		+++
18 19 19 20 20 21 22 23 23 24 24 25 26 27 V V 28 29 29 30 30		66		111		++-+
19 20 21 22 23 24 25 26 27 V 28 29 29 30 30	$\bot\bot\bot$	67	+	111		+++
20		68		11	+	++
21		69				+++
21		70		121		+ +-+
23 (24) 25 26 27 V V 281 -		71		12		+++
25 26 27 V V 28 - 29		72		12		+++
25 26 27 V V 28 ₁ -		73		12		+++
26 27 V V 28 - 29		74		12		+++
26 27 V V 28 - 29		75				+
28 29 30		76		12		+++
30		77		12		+++
30		78		12		+++
		79	 	13		1 1 1
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		81		++++ + + + + + + + + + + + + + + + + + +		+
32		82		+ + 1 1		
33			 	++-		+++
34	\square	84	 	1:		+++
35		86		++-		+
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37		87		1 1:		+
38		89		1		+
39			 		10	
40		90	 		41	++-
41	\bot	91		1 1 1 1 1 1	42	++-
42		92	 - - - -		43	++-
43		93			44	++-
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45	\Box	95	 		46	+-+-
46		96	 		47	+
47		97		1 1 1 1 1 1		+
48		98	 		48	++-
50		100	 	++-	49 50	+

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)